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Effective October 1, 2000 99777500

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS						ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILE	D NUME	BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus	20= * -	0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS						ļ	X40=	40	OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT			Ì	+135=	-	OR	+270≦	
* If the difference in column 1 is less than zero, er			enter "0" in	column 2	i		<b>3</b> 95	OR	TOTAL		
CLAIMS AS AMENDED - PART II							· · · · · · · · · · · · · · · · · · ·			OTHER THAN	
(Column 1)			(Column 2) (Column 3)				SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus *	· 20	= /		X\$ 9=		OR	X\$18=	
	Independent	. 4		4	= /		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPEN	NDENT CLAIN			+135=		OR	+270=	
						L	TOTAL ADDIT. FEE		00	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	,	ADDII. FCC			, ADDII. I CC	
AMENDMENT B	I Was	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 18	Minus *	· 20,	=		X\$ 9=		OR	X\$18=	
	Independent	* 3	Minus .	ALL CLAIR	= /		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JETIFLE DEFEI	NDENT CLAIN	<u>'</u>	³ [	+135=		OR	+270=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
	Independent	*	1	***	<u> </u>	┇	X40=		IOR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEPE	NDENT CLAIN	И 🔲	┚┟	105			.070	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
•••	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										